# FORM D



#### INITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

## NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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OMB	APPF	<b>NOK</b>	\L	
OMB Num	per:	3	235-0	076
Expires: Estimated	Аргі	30	),20	08
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SEC	USE ONLY
Prefix	Serial
DA	TE RECEIVED

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  Texas Energy Holdings, Inc., Chesapeake #1 Program	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing X Amendment	BECEIVED
A. BASIC IDENTIFICATION DATA	// ncr a mane
1. Enter the information requested about the issuer	001 0 % ZUUL:
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Texas Energy Holdings, Inc.	151
Address of Executive Offices (Number and Street, City, State, Zip Code) 10935 Estate Lane, Suite 325, Dallas, TX 75238	Telephone Number (Including Area Code) 214-231-4000
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
C control control	please specify): PROCES ral partnership
Month Year  Actual or Estimated Date of Incorporation or Organization: 018 013 X Actual Esti  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for Stat  CN for Canada; FN for other foreign jurisdiction)	imated c:  TX  SINANANA
GENERAL INSTRUCTIONS	
Federal:	4(C) 17 CED 010 COL -4 15 115 C

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

1 of 9

		A. BASIC ID	ENTIFICATION DATA		
Enter the information rec	uested for the fol	lowing:			
			within the past five years;		
					class of equity securities of the issuer.
• Each executive offi	cer and director of	f corporate issuers and of	f corporate general and ma	naging partners of p	artnership issuers; and
Each general and m	anaging partner o	f partnership issuers.			
Check Dayles' that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	▼ General and/or
Check Box(es) that Apply:	L Hamotes				Managing Partner
	C:_divideal\				
Full Name (Last name first, it	ingividuai)				
Texas Energy Holdings	, Inc.	Carro City State 7 in C			
Business or Residence Addre			Asite)		
10935 Estate Lane, Suit				W Disertes	General and/or
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	X Director	Managing Partner
Full Name (Last name first, it	f individual)				
Willis, Phillip C.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
10935 Estate Lane, Suit	e 325, Dallas,	TX			
Check Box(es) that Apply:	X Promoter	Beneficial Owner	Executive Officer	Director	☐ General and/or  Managing Partner
Full Name (Last name first, i	f individual)				
Ladymon, Casey W.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip (	Code)		
10935 Estate Lane, Suit	te 325, Dallas,	TX			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or
	<u></u>	_			Managing Partner
Full Name (Last name first, i	if individual)				
Business or Residence Addre	ss (Number and	Street, City, State, Zip	Code)		حسوسی محت بسید و حسی محت و حسی است است است است و حسی است
	•				
Check Box(es) that Apply:	Promoter	Beneficial Owner	r	Director	General and/or
Circa Dorles, mar spirs.			ш	_	Managing Partner
Full Name (Last name first, i	if individual)				AND THE PARTY OF T
run vame (Last name tust,	ir marvioan)				
Business or Residence Addre	ec (Number and	1 Street City State Zin			
Bigliezz of Kezidence Magn	,35 (Number and	a critecy enjy, crase, 2-4			
	D-market	☐ Beneficial Owner		r Director	General and/or
Check Box(es) that Apply:	Promoter	☐ Beneticiai Owiic			Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Numberano	d Street, City, State, Zip	Code)		
				- D Bissets	General and/or
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Office	T Director	Managing Partner
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·			
Business or Residence Addr	ess (Number and	d Street, City, State, Zip	Code)		
<del></del>	(Use bi	lank sheet, or copy and u	ise additional copies of this	s sheet, as necessary	)

					B. IN	FORMATIC	ON ABOUT	OFFERIN	¥G				
L												Yes	No
1.	Has the i	ssuer sold,	or does the								**************		X
						Appendix,						\$ 23,	500
2.	What is t	he minimu	ım investm	ent that wi	II be accep	ited from a	ny inaiviai	lau?		************	***************************************	Yes	No
3.			ermit joint									X	
4.	Enter the	in formati	on requeste	ed for each	person w	ho has been	or will b	e paid or g	given, direc	ally or indi-	rectly, any		
	If a perso	n to be list list the na	lar remuner ed is an asso me of the br you may se	ociated per oker or de:	son or age: aler. If mo	nt of a broke re than five	er or deale: (5) person	registered s to be liste	with the S ed are asso	EC and/or v	with a state		
Fu	ll Name (L	ast name f	īrst, if indi	vidual)									
Di	rect Capit	al Securit	ties Address (N	umber and	Street Ci	tv. State Z	in Code)						
			, Suite 600										
Na	me of Ass	ociated Br	oker or Dea	ıler									
_			Listed Has	G. U. S.		ta Caliait I	) maka sane						
Sta			Listed Has "or check									□ All	States
	(Спеск	All States	UI CHOUK	mid (vidum	siares)								<u> </u>
	AL	AK	AZ	AR	CA	CO	CT ME	DE MD	MA	FL MI	GA MN	HI MS	MO
	IL] [MT]	IN NE	NV	KS NH	KY NJ	LA NM	NY	NC NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	wv	WI	WY	PR
	,		first, if indi Address (N		A Stract C	itur Stata	Zin Code)						
BL	isiness or	Residence	Address (r	Vannoer an	u succi, C	ny, sano, i	sip code)						
Na	ime of Ass	ociated Br	oker or Dea	aler									
St			Listed Has										
	(Check	"All States	" or check	individual	States)		A	************				☐ AI	l States
	ĀL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО
	MT	NE	NV	NH	NJ	NM	NY]	NC	ND	OH	OK WI	OR WY	PA PR
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	[WI]	[VY I]	[FK]
Fu	ıll Name (	Last name	first, if ind	ividual)									
B	usiness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
N	ame of Ass	ociated B	roker or De	aler							- MA		• • • • • • • • • • • • • • • • • • • •
St	ates in Wh	ich Person	Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers	<del></del>					
			s" or check									. <b> </b> A	ll States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	T.	ĪN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM UT	NY VT	NC VA	ND WA	OH WV	OK. WI	OR WY	PA
	RI	SC	SD	TN	TX	(J) 1	A 1	4 14	144	.,,,,		···•	لتنت

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and					
	already exchanged.  Type of Security		Aggregate Tering Price		Am	ount Already Sold
	••	,	0		s	0
	Debt					0
	Equity	<b></b>	U		\$	<u> </u>
	Common Preferred	•	0			0
	Convertible Securities (including warrants)			<del></del>	<b>s</b>	
	Partnership Interests				\$	0
	Other (Specify Units of Working Interest			_		1,051,959
	Total	<u></u>	1,175,000		s	1,051,959
	Answer also in Appendix, Column 3, if filing under ULOE.					
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Number Investors			Aggregate ollar Amount f Purchases
	Accredited Investors		9	_	<b>s</b> _	910,959
	Non-accredited Investors		2		<b>S</b>	141,000
	Total (for filings under Rule 504 only)				\$	
	Answer also in Appendix, Column 4, if filing under ULOE.					
3.						
			Type of		D	ollar Amount
	Type of Offering		Security			Sold
	Rule 505				\$_	
	Regulation A			_	\$_	
	Rule 504				<b>S</b>	
	Total				<b>\$</b>	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.					
	Transfer Agent's Fees			X	<b>S</b>	0
	Printing and Engraving Costs	••••	·····	X	<b>S</b>	3,000
	Legal Fees	<b></b>		X	<u>\$</u>	5,000
	Accounting Fees			X	<b>S</b>	0
	Engineering Fees				\$_	0
	Sales Commissions (specify finders' fees separately)			X	\$	0
	Other Expenses (identify)Due Diligance, Shipping, Filing fees				s_	3,500
	Total			X	<b>\$</b>	11,500

	and total expenses furnished in response to	egate offering price given in response to Part C— Part C—Question 4.a. This difference is the "adj	usted gross		<b>§</b> 1,	163,500
5.	Indicate below the amount of the adjusted each of the purposes shown. If the amo	d gross proceed to the issuer used or proposed to unt for any purpose is not known, furnish an es the total of the payments listed must equal the adj	be used for timate and			
			Di	nyments to Officers, irectors, & iffiliates		yments to Others
	Salaries and fees		<b>X</b> \$_	47,250	_ X \$_	117,500
	Purchase of real estate		🕱 S_	0	_ XS_	0
	Purchase, rental or leasing and installati	on of machinery	X S	0	X S_	0
	• •	gs and facilities	<del></del>		_	0
	offering that may be used in exchange for	ng the value of securities involved in this or the assets or securities of another	<u>x</u> \$_		_	998,750
	Repayment of indebtedness		🔀 \$_	0	_ X \$_	0
	Working capital		🔀 S_	0	_ X \$_	0
	Other (specify):		X \$_	0	_ X \$_	0
	Legal, Postage, Printing, Delivery, Tax O	-pinion, and other offering expeses				
			🛛 S_	58,750	_ 🗶 \$_	0
	Column Totals				_ X \$_	117,500
	Total Payments Listed (column totals at	dded)		<b>X</b> \$_	1,163,50	0
Γ		D. FEDERAL SIGNATURE				
sig	nature constitutes an undertaking by the is	ened by the undersigned duly authorized person. Issuer to furnish to the U.S. Securities and Exchains non-accredited investor pursuant to paragraph	nge Commission h (b)(2) of Rule	, upon writt 502.	ule 505, en reque	the followingst of its staff
İss	uer (Print or Type)	Signature	Date			
Te	xas Energy Holdings, Inc.	part, p	Sep	tember 22,	2006	
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)				
R	chard K. Hartnett	Associate				

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE	
1.	Is any party described in 17 CFR 230 provisions of such rule?	262 presently subject to any of the disqualific	cation Yes No
		See Appendix, Column 5, for state respons	e.
2.	The undersigned issuer hereby underta D (17 CFR 239.500) at such times as	akes to furnish to any state administrator of any required by state law.	state in which this notice is filed a notice on Form
3.	The undersigned issuer hereby under issuer to offerees.	takes to furnish to the state administrators, up-	on written request, information furnished by the
4.	limited Offering Exemption (ULOE)	at the issuer is familiar with the conditions that of the state in which this notice is filed and understablishing that these conditions have been sa	t must be satisfied to be entitled to the Uniform lerstands that the issuer claiming the availability tisfied.
	uer has read this notification and knows t athorized person.	he contents to be true and has duly caused this n	otice to be signed on its behalf by the undersigned
Issuer (	(Print or Type)	Signifure	Date
Texas	Energy Holdings, Inc.	Latial K.	September 22, 2006
	(Print or Type)	Title (Print or Type)	

<u>Associate</u>

Richard K. Hartnett

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

### 4 3 2 1 Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell explanation of offering price Type of investor and to non-accredited waiver granted) amount purchased in State offered in state investors in State (Part E-Item 1) (Part C-Item 2) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited No Yes **Investors** Amount Investors Amount State Yes No ALAK AZAR CA \$94,000 X \$1,175,000 \$517,000 1 3 Χ co CT DE DC \$47,000 X FL \$1,175,000 1 Χ GA н ID ΤL IN IA KS KY LA ME MDMA MI MN MS

APPENDIX

## **APPENDIX**

1	Intend to non-a investor	2 I to sell eccredited s in State i-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)			5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН		Х	\$1,175,000	1	\$222,220		,		х
ОК		Х	\$1,175,000	1	\$23,500				x
OR									
PA									i
RI									
sc									
SD									
TN									
TX		x	\$1,175,000	2	\$94,000				х
UT									
VT									
VA									
WA				1					
wv									
WI		x	\$1,175,000	11	\$47,000				x

#### **APPENDIX** 1 2 3 4 5 Disqualification under State ULOE Type of security and aggregate Intend to sell (if yes, attach offering price offered in state to non-accredited Type of investor and explanation of amount purchased in State (Part C-Item 2) waiver granted) investors in State (Part B-Item 1) (Part C-Item 1) (Part E-Item 1) Number of Number of Accredited Non-Accredited Yes State No Investors Amount Investors Amount Yes No

WY

PR.